

ATTORNEY DOCKET NO. 21085.0134U4
ELECTRONIC FILING
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | |
|--|---|------------------------------------|
| In re Application of |) | |
| |) | |
| RUPPERT <i>et al.</i> |) | Art Unit: 1643 |
| |) | |
| Application No.: 10/776,133 |) | |
| |) | Examiner: Canella, Karen A. |
| Filing Date: February 11, 2004 |) | |
| |) | |
| For: “KRUPPELL-LIKE TRANSCRIPTIONAL |) | Confirmation No.: 5751 |
| FACTOR KLF4/GKLF AND USE |) | |
| THEREOF” |) | |

TRANSMITTAL LETTER


Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NEEDLE & ROSENBERG, P.C.
Customer Number 23859

Sir:

Transmittal herewith is/are the following in the above-identified application:

| | |
|--|--|
| <input checked="" type="checkbox"/> Amendment/Response to Office Action <input checked="" type="checkbox"/> Fee as calculated below <input type="checkbox"/> No Additional Fee Required <input type="checkbox"/> Corrected Drawings | <input checked="" type="checkbox"/> Request for Extension of Time <input type="checkbox"/> Supplemental Declaration <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Other _____ |
|--|--|

| CLAIMS AS AMENDED | | | | | | | |
|---|--|--|--|---|---|---|-------------------|
| CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA | RATE | | ADDITIONAL FEE |
| Total Claims | | | | | X \$50.00 | | \$0.00 |
| Independent Claims | | | | | X \$200.00 | | \$0.00 |
| <input type="checkbox"/> First Presentation of a Multiple Dependent Claim | | | | | + \$360.00 | | \$0.00 |
| EXTENSION FEE | 1 st Month \$120 <input type="checkbox"/> | 2 nd Month \$450 <input type="checkbox"/> | 3 rd Month \$1020 <input checked="" type="checkbox"/> | 4 th Month \$1590 <input type="checkbox"/> | 5 th Month \$2160 <input type="checkbox"/> |  | \$1020.00 |
| <input type="checkbox"/> Reduction by ½ for filing by SMALL ENTITY (Note 37 C.F.R. § 1.9, § 1.27, § 1.28) - | | | | | | | - \$510.00 |
| TOTAL FEE DUE | | | | | | | \$510.00 |

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Payment:

- ☐ A check in the amount of \$_____ is enclosed.
- ☒ Payment by credit card in the amount of \$510.00 for the fees designated below.
- ☐ The Commissioner is authorized to charge our Deposit Account No. 14-0629 in the amount of \$_____ to cover the above-listed additional fees. A duplicate copy of this transmittal is enclosed.
- ☒ In the event of an overpayment or improper payment of a required fee, the Commissioner is authorized to charge or credit our Deposit Account No. 14-0629 as required to correct the error.

NEEDLE & ROSENBERG, P.C.

/Charley F. Brown #52,658/
Charley F. Brown
Registration No. 52,658

NEEDLE & ROSENBERG, P.C.
Customer Number 23859
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